

PART B - FEE(S) TRANSMITTAL



JUL 31 2006
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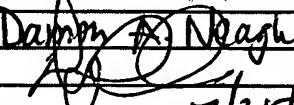
35813 7590 04/25/2006

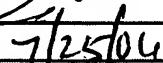
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 (Depositor's name)

 (Signature)

 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/661,760	09/12/2003	Roger J. Jellicoe	MOT-CS22372RL	8152

TITLE OF INVENTION: COMMUNICATION DEVICE HAVING MULTIPLE KEYPADS

08/02/2006 CNGUYEN1 00000031 10661760

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE
nonprovisional	NO	\$1400	\$300	\$1700

EXAMINER	ART UNIT	CLASS-SUBCLASS
WEST, LEWIS G	2618	455-575100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1. Design IP 2. 3.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Motorola, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Schaumburg, IL

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies _____

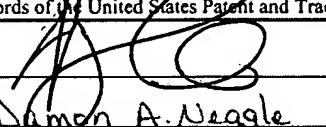
4b. Payment of Fee(s):

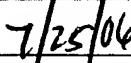
A check in the amount of the fee(s) is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

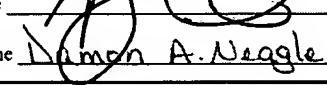
5. Change in Entity Status (from status indicated above)

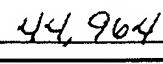
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

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Date 

Typed or printed name 

Registration No. 

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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IN THE UNITED STATES PATENT & TRADEMARK OFFICE

**TRANSMITTAL
FORM**

	Application Number	10/661,760
	Filing Date	September 12, 2003
	First Named Inventor	Roger J. Jellicoe
TITLE	COMMUNICATION DEVICE HAVING MULTIPLE KEYPADS	
	Art Unit	2618
	Examiner Name	Lewis G. WEST
	Attorney Docket Number	MOT-CS22372RL

ENCLOSURES

<u>Description</u>	<u># of pages</u>
Issue Fee Transmittal	1
Credit Card Payment Form	1
“Fee Address” Indication Form	1

Total number of pages in this submission (including this page):	4
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Signature of Applicant, Attorney or Agent

Name:	Damon A. Neagle, Reg. No. 44,964 phone: 610-395-4900 fax: 610-680-3312
Signature	
Date:	July 25, 2006

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name: Danielle Schwarz

Signature: Date: July 25, 2006